

U.S. ENVIRONMENTAL PROTECTION AGENCY
NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

INSTRUCTIONS: If you received a preprinted label, affix it in the space at left. If any of the information on the label is incorrect, draw a line through it and supply the correct information in the appropriate section below. If the label is complete and correct, leave Items I, II, and III below blank. If you did not receive a preprinted label, complete all items. "Installation" means a single site where hazardous waste is generated, treated, stored and/or disposed of, or a transporter's principal place of business. Please refer to the INSTRUCTIONS FOR FILING NOTIFICATION before completing this form. The information requested herein is required by law (Section 3010 of the Resource Conservation and Recovery Act).

PLEASE PLACE LABEL IN THIS SPACE

FOR OFFICIAL USE ONLY

COMMENTS

INSTALLATION'S EPA I.D. NUMBER: FRID00084317721
APPROVED: A
DATE RECEIVED (yr., mo., & day): 800828

AUG 18 4 15 AM '80

I. NAME OF INSTALLATION

SUNOCO SERVICE STATION

II. INSTALLATION MAILING ADDRESS

STREET OR P.O. BOX

629 BALD HILL ROAD

CITY OR TOWN

WARWICK

ST.

ZIP CODE

RI 02886

III. LOCATION OF INSTALLATION

STREET OR ROUTE NUMBER

SAME 629 BALD HILL RD

CITY OR TOWN

WARWICK

ST.

ZIP CODE

RI 02886

IV. INSTALLATION CONTACT

NAME AND TITLE (last, first, & job title)

LAUBINGER ROBERT MAINT MGR

PHONE NO. (area code & no.)

617-875-1371

V. OWNERSHIP

A. NAME OF INSTALLATION'S LEGAL OWNER

SUN OIL COMPANY OF PENNSYLVANIA

B. TYPE OF OWNERSHIP
(enter the appropriate letter into box)F = FEDERAL
M = NON-FEDERAL

M

VI. TYPE OF HAZARDOUS WASTE ACTIVITY (enter "X" in the appropriate box(es))

☒ A. GENERATION☐ B. TRANSPORTATION (complete item VII)☒ C. TREAT/STORE/DISPOSE☐ D. UNDERGROUND INJECTION

VII. MODE OF TRANSPORTATION (transporters only - enter "X" in the appropriate box(es))

☐ A. AIR☐ B. RAIL☐ C. HIGHWAY☐ D. WATER☐ E. OTHER (specify):

VIII. FIRST OR SUBSEQUENT NOTIFICATION

Mark "X" in the appropriate box to indicate whether this is your installation's first notification of hazardous waste activity or a subsequent notification. If this is not your first notification, enter your Installation's EPA I.D. Number in the space provided below.

☒ A. FIRST NOTIFICATION☐ B. SUBSEQUENT NOTIFICATION (complete item C)

C. INSTALLATION'S EPA I.D. NO.

IX. DESCRIPTION OF HAZARDOUS WASTES

Please go to the reverse of this form and provide the requested information.

IX. DESCRIPTION OF HAZARDOUS WASTES (continued from front)

A. HAZARDOUS WASTES FROM NON-SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from non-specific sources your installation handles. Use additional sheets if necessary.

1	2	3	4	5	6
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
7	8	9	10	11	12
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26

B. HAZARDOUS WASTES FROM SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific industrial sources your installation handles. Use additional sheets if necessary.

13	14	15	16	17	18
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
19	20	21	22	23	24
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
25	26	27	28	29	30
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26

C. COMMERCIAL CHEMICAL PRODUCT HAZARDOUS WASTES. Enter the four-digit number from 40 CFR Part 261.33 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary.

31	32	33	34	35	36
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
37	38	39	40	41	42
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
43	44	45	46	47	48
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26

D. LISTED INFECTIOUS WASTES. Enter the four-digit number from 40 CFR Part 261.34 for each listed hazardous waste from hospitals, veterinary hospitals, medical and research laboratories your installation handles. Use additional sheets if necessary.

49	50	51	52	53	54
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26

E. CHARACTERISTICS OF NON-LISTED HAZARDOUS WASTES. Mark "X" in the boxes corresponding to the characteristics of non-listed hazardous wastes your installation handles. (See 40 CFR Parts 261.21 - 261.24.)

☒ 1. IGNITABLE
(D001)

☐ 2. CORROSIVE
(D002)

☐ 3. REACTIVE
(D003)

☒ 4. TOXIC
(D000)

X. CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

SIGNATURE

NAME & OFFICIAL TITLE (type or print)

DATE SIGNED

A. B. Chieffo
Mgr, Environmental, Safety-
Health and Security

8/4/80

U.S. ENVIRONMENTAL PROTECTION AGENCY
NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

INSTALLATION'S EPA I.D. NO.

I. NAME OF INSTALLATION

II. INSTALLATION MAILING ADDRESS

III. LOCATION OF INSTALLATION

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INSTALLATION'S EPA I.D. NUMBER

APPROVED

DATE RECEIVED (yr., mo., & day)

800828

Aug 18 4 10 AM '80

I. NAME OF INSTALLATION

EXPRESS LUBE

II. INSTALLATION MAILING ADDRESS

STREET OR P.O. BOX

629 BALD HILL ROAD

CITY OR TOWN

WARWICK

ST.

ZIP CODE

R502887

III. LOCATION OF INSTALLATION

STREET OR ROUTE NUMBER

SAME 629 BALD HILL ROAD

CITY OR TOWN

WARWICK

ST.

ZIP CODE

R502887

IV. INSTALLATION CONTACT

NAME AND TITLE (last, first, & job title)

KLINE SIMMAR

PHONE NO. (area code & no.)

215-972-4159

V. OWNERSHIP

A. NAME OF INSTALLATION'S LEGAL OWNER

SUN OIL COMPANY OF PENNSYLVANIA

B. TYPE OF OWNERSHIP (enter the appropriate letter into box)

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☒ A. FIRST NOTIFICATION☐ B. SUBSEQUENT NOTIFICATION (complete item C)

C. INSTALLATION'S EPA I.D. NO.

IX. DESCRIPTION OF HAZARDOUS WASTES

Please go to the reverse of this form and provide the requested information.

5	W	R	I	D	0	0	0	8	4	1	3	7	9	2	1
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16

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SIGNATURE

NAME & OFFICIAL TITLE (type or print)

DATE SIGNED

A. B. Chieffo
Mgr, Environmental, Safety-
Health and Security

8/4/80

EPA IDENTIFICATION NUMBER

RID0000841379

INITIALS

ap

DATE

9/2/87

ACTION TAKEN:

DELETED TSD ☒

ADDED GENERATOR ☐

COMMENT ADDED:

2 TREAT IN TANKS (PERMIT BY RULE) ☐ 2

3 POTW (PERMIT BY RULE) ☐ 3

4 LESS THAN 90 DAY STORAGE ☐ 4

5 A. NON-REGULATED WASTE ☐ 5

B. GENERATOR ONLY ☐

6 TOTALLY ENCLOSED SYSTEM ☐ 6

7 3007 LETTER RESPONSE ☐ 7

8 NON-REGULATED (TRANSPORTER ONLY) ☐ 8

9 OTHER ☐ 9



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY

REGION I

J. F. KENNEDY FEDERAL BUILDING, BOSTON, MASSACHUSETTS 02203

1/21/82

RE: RCRA facility located at 629 Bald Hill Road, Warwick, RI
EPA i.d. number RID000841379
EPA i.d. number RID000843177

Dear RCRA Hazardous Waste Notifier:

EPA Region I has just completed an audit of its files on notifiers under Section 3010 of the Resource Conservation Recovery Act (RCRA) and has discovered that duplicate notifications were filed for the facility referenced above, and that, consequently, two EPA i.d. numbers were assigned to the facility.

Accordingly, EPA i.d. number RID000841379 is being deleted and you should now use only EPA i.d. number RID000843177 for the above referenced facility. Should you have any questions concerning this matter, please contact me at (617) 223-0240.

Sincerely yours,

Richard Cavagnero, Region I Notification Project Officer